MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/579,006	5/11/06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1				51				1		
2				1			52			e			
3				2			53						
4			(1)				54						
5			(1)				55			e			
6			(1)				56						
7			(1)				57						
8			(1)				58						
9			(1)				59						
10			(1)				60						
11			(1)				61						
12				1			62						
13				1			63						
14			1				64						
15				1			65						
16				1			66						
17			1				67						
18				1			68						
19				1			69						
20			(1)				70						
21				1			71						
22			(1)				72						
23				1			73						
24				1			74						
25			(1)				75						
26			(1)				76						
27				1			77						
28			e				78						
29				1			79						
30			e				80						
31			e				81						
32			e				82						
33			1				83						
34			1				84						
35				2			85						
36			e				86						
37			1				87						
38				1			88						
39			1				89						
40			1				90						
41			1				91						
42				1			92						
43				1			93						
44			e				94						
45				1			95						
46			e				96						
47			1				97						
48				1			98						
49			1				99						
50				1			100						
TOTAL IND.							TOTAL IND.			11			
TOTAL DEP.							TOTAL DEP.			35			
TOTAL CLAIMS							TOTAL CLAIMS			46			

PTO - 1360 (REV. 11/04)